

**THE TOWN OF ERIE
EMPLOYEE BENEFIT INFORMATION – 2010**

HEALTH, DENTAL & VISION INSURANCE

Health Insurance: Employees have a choice between HMO/PPO plans from Anthem/Blue Cross Blue Shield. The HMO/PPO plans have different benefit levels and costs. Open enrollment occurs once a year. Prescription drug benefits are included in all HMO/PPO options. Employee premium contributions are deducted pre-tax.

| | Monthly Premium | FT EE Contribution (biweekly) | Town Contribution FT EE (biweekly) | PT EE Contribution (biweekly) | Town Contribution PT EE (biweekly) | COBRA Rates (monthly) |
|----------------------------------|--------------------|-------------------------------------|---|-------------------------------------|---|-----------------------------|
| ANTHEM PLAN HMO BD | | | | | | |
| Employee | \$ 361.07 | \$ - | \$ 167.00 | \$ 42.00 | \$ 125.00 | \$ 368.29 |
| EE/Spouse | \$ 794.34 | \$ 50.00 | \$ 317.00 | \$ 122.00 | \$ 245.00 | \$ 810.23 |
| EE/Child(ren) | \$ 686.03 | \$ 37.00 | \$ 279.00 | \$ 102.00 | \$ 215.00 | \$ 699.75 |
| Family | \$1,119.31 | \$ 87.00 | \$ 429.00 | \$ 182.00 | \$ 335.00 | \$ 1,141.70 |
| ANTHEM PLAN HMO AD | | | | | | |
| Employee | \$ 384.10 | \$ 11.00 | \$ 167.00 | \$ 52.00 | \$ 125.00 | \$ 391.78 |
| EE/Spouse | \$ 845.02 | \$ 84.00 | \$ 306.00 | \$ 156.00 | \$ 234.00 | \$ 861.92 |
| EE/Child(ren) | \$ 729.80 | \$ 68.00 | \$ 269.00 | \$ 132.00 | \$ 204.00 | \$ 744.40 |
| Family | \$ 1,190.71 | \$ 131.00 | \$ 418.00 | \$ 225.00 | \$ 324.00 | \$ 1,214.52 |
| ANTHEM PLAN PPO 5 | | | | | | |
| Employee | \$ 400.38 | \$ 18.00 | \$ 167.00 | \$ 60.00 | \$ 125.00 | \$ 408.39 |
| EE/Spouse | \$ 880.81 | \$ 111.00 | \$ 295.00 | \$ 158.00 | \$ 248.00 | \$ 898.43 |
| EE/Child(ren) | \$ 760.71 | \$ 93.00 | \$ 258.00 | \$ 135.00 | \$ 216.00 | \$ 775.92 |
| Family | \$1,241.14 | \$ 165.00 | \$ 408.00 | \$ 229.00 | \$ 344.00 | \$1,265.96 |
| ANTHEM PLAN PPO 2 | | | | | | |
| Employee | \$ 451.86 | \$ 42.00 | \$ 167.00 | \$ 84.00 | \$ 125.00 | \$ 460.90 |
| EE/Spouse | \$ 994.08 | \$ 184.00 | \$ 275.00 | \$ 256.00 | \$ 203.00 | \$ 1,013.96 |
| EE/Child(ren) | \$ 858.53 | \$ 159.00 | \$ 237.00 | \$ 223.00 | \$ 173.00 | \$ 875.70 |
| Family | \$1,400.74 | \$ 259.00 | \$ 387.00 | \$ 353.00 | \$ 293.00 | \$1,428.75 |
| MetLife Dental Plan | | | | | | |
| Employee | \$ 30.39 | \$ - | \$ 14.00 | \$ 4.00 | \$ 11.00 | \$ 31.00 |
| EE/Spouse | \$ 62.87 | \$ 4.00 | \$ 25.00 | \$ 10.00 | \$ 20.00 | \$ 64.13 |
| EE/Child(ren) | \$ 72.27 | \$ 5.00 | \$ 29.00 | \$ 11.00 | \$ 22.00 | \$ 73.72 |
| Family | \$ 104.75 | \$ 9.00 | \$ 50.00 | \$ 17.00 | \$ 31.00 | \$ 106.85 |
| Vision Service Plan (VSP) | | | | | | |
| Employee | \$ 12.98 | \$ - | \$ 6.00 | \$ 2.00 | \$ 4.00 | \$ 13.24 |
| EE/Spouse | \$ 18.83 | \$ 1.00 | \$ 8.00 | \$ 3.00 | \$ 6.00 | \$ 19.21 |
| EE/Child(ren) | \$ 33.76 | \$ 2.00 | \$ 13.00 | \$ 5.00 | \$ 10.00 | \$ 34.44 |
| Family | \$ 33.76 | \$ 2.00 | \$ 13.00 | \$ 5.00 | \$ 10.00 | \$ 34.44 |

| Insurance | Monthly Premium | Employee Contribution | Employer Contribution |
|--|---|---|---|
| Life Insurance (Employee only - 1.5 X annual base earnings, maximum \$150,000) | .18/month per \$1,000 of coverage | \$ -0- | .18/month per \$1,000 of coverage |
| Accidental Death & Dismemberment Insurance (Employee only - 1.5 X annual base earnings, maximum \$150,000) | .045/month per \$1,000 of coverage | \$ -0- | .045/month per \$1,000 of coverage |
| Short Term Disability (Employee only - 60% of covered weekly earnings, maximum \$1,000) | .25/month per \$10 of coverage | \$ -0- | .25/month per \$10 of coverage |
| Long Term Disability (Employee only - 60% of covered monthly earnings, maximum \$5,000) | .30/month per \$100 of salary | \$ -0- | .30/month per \$100 of salary |
| Long Term Disability (Employee only - Sworn police officers only) | Paid through state FPPA fund for employees hired prior to 1/1/97; 2.6% of base pay hired thereafter | \$ -0- hired before 1/1/97 2.6% of base pay hired after 1/1/97 | Paid through state FPPA fund for employees hired prior to 1/1/97; 0% of base pay hired after 1/1/97 |

| PRE-TAX OR TAX DEFERRED PLANS | | | |
|--|--|---|--|
| Social Security/Medicare | | | |
| Social Security | 12.40% | 6.20% | 6.20% |
| Medicare | 2.90% | 1.45% | 1.45% |
| Note: Contributions to Social Security do not apply to sworn police officers. | | | |
| Deferred Compensation 457 Plan (Voluntary) – Administered by the Standard | | | |
| Deferred Compensation Plan 457 | Voluntary up to \$16,500 per year (\$22,000 if over 50) | Voluntary up to \$16,500 per year (\$22,000 if over 50) | |
| Savings Plan 401(a) (excludes sworn police officers) | Up to 5% match per year for participants in the Deferred Compensation Plan | | Up to 5% match per year for participants in the Deferred Compensation Plan |

| Defined Benefit Plan for New Hire Peace Officers (Mandatory Participation) - Administered by FPPA | | | |
|---|------------------------|-----------------------|-----------------------|
| New Hire Money Purchase Plan | 16.000% of base salary | 8.000% of base salary | 8.000% of base salary |
| There is a graduated schedule for vesting of employer contributions. This defined benefit plan is for sworn police officers only. | | | |

| LEAVE PLAN | | | |
|--|------------------------|---------------------------------|-----------------|
| Paid-Time Off (PTO) | | | |
| Months of Continuous Service | Accrual per Pay Period | Total Annual Hours | Maximum Accrual |
| 0-36 months (<3 years) | 5.6 | 146 | 219 |
| 37-60 months (3-5 years) | 7.2 | 187 | 281 |
| 61-72 months (5-6 years) | 7.5 | 195 | 293 |
| 73-84 months (6-7 years) | 7.8 | 203 | 305 |
| 85-96 months (7-8 years) | 8.1 | 211 | 317 |
| 97-108 months (8-9 years) | 8.4 | 218 | 327 |
| 109+ months (>9 years) | 8.7 | 226 | 339 |
| Extended Sick Leave Benefit (ESL) | | | |
| ESL is available for employee medical absences (supported by physician's written evaluation) in excess of 5 scheduled shifts. Leave accrues at 1.85 hours per pay period and it not payable upon termination. ESL runs concurrent with the Family Medical Leave Program (See the handbook for details). Maximum Accrual: 144 Hours | | | |
| Holiday Leave Benefit | | | |
| Eligible full-time employees shall receive holiday leave on Employer-observed holidays according to the following schedule: | | | |
| Holiday Observed by Erie | | Hours of Holiday Leave Provided | |
| New Year's Eve (December 31 st) | | 8 | |
| New Year's Day (January 1 st) | | 8 | |
| President's Day (3 rd Monday in February) | | 8 | |
| Memorial Day (Last Monday in May) | | 8 | |
| Independence Day (July 4 th) | | 8 | |
| Labor Day (1 st Monday in September) | | 8 | |
| Thanksgiving Day (4 th Thursday in November) | | 8 | |
| Friday Following Thanksgiving | | 8 | |
| Christmas Eve (December 24 th) | | 8 | |
| Christmas Day (December 25 th) | | 8 | |
| When a holiday falls on a Saturday, the holiday generally will be observed on the preceding Friday. When a holiday falls on a Sunday, the holiday generally will be observed on the following Monday. | | | |
| Additional Leaves | | | |
| Additional Leaves are available such as injury, civil, military, bereavement, without pay, and administrative. See the Employee Handbook for more details. | | | |

| ADDITIONAL BENEFITS | | | |
|---|--------------------------------------|---|--------|
| Supplemental Insurance | | | |
| Supplemental Life Insurance (Voluntary coverage for employee and eligible dependents) See The Standard for rates. | Based on amount of coverage and age. | 100% of premium is paid by the employee | \$ -0- |
| Section 125 Cafeteria Plan | | | |
| Medical Reimbursement Account | \$5,000 | \$5,000 | \$ -0- |
| Dependent Day Care Account | \$5,000 | \$5,000 | \$ -0- |
| Pre-paid Legal Plan | | | |
| Pre-paid Legal Services offers free or reduced cost legal representation for a monthly fee. Services available include Preventive, Motor Vehicle, Trial Defense, IRS Audit and more. | | | |
| Employee Assistance Program | | | |
| The Employee Assistance Program is designed to help employees deal with problems of a personal or family nature -- problems off the job, but ones that might prevent employees from doing their jobs to the best of their abilities. The EAP is a confidential program administered by Mines & Associates, P.C. An employee or any family member can call for an appointment with the EAP. In case of emergency during the night, weekends, or holidays, counselors are available to talk on the 24-hour telephone hotline. For a confidential interview, call 1-800-873-7138. The Employer pays 100% of the premium. | | | |
| Mileage Allowance | | | |
| An employee who uses his/her privately owned vehicle for official town business that involves in-state travel is entitled to reimbursement. | | | |
| Recreation Benefit | | | |
| With the addition of the Erie Community Center, benefited employees are eligible to use the Community Center at no charge and may be eligible for discounted rates for dependents. Employees are responsible for paying any additional fees for court rental, fee based classes, childcare, etc. | | | |
| This handout is intended as a summary of benefit information only and in no way replaces the information contained in the Town of Erie Personnel Policies and other benefit plan documents. The Personnel Policies and other benefit plan documents will be used to administer the different benefit plans and programs including determining benefits for which employees are eligible. Employees should refer to the Personnel Policies and other benefit plan documents for more details regarding eligibility, definitions, procedures, limitations, and exclusions. | | | |